FORM D

SEC Mail Mail Processing Section

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

MAY 09 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

Washington, DC

SECTION 4(6), AND/OR 108 UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response 16.00

SEC USE ONLY							
Prefix	Serial						
DATE RECEIVED							

Name of Offering (check if this is an amendment and name has changed, and indicated the change of t	ate change.)
Sale and Issuance of Series F Preferred Stock and Warrants (including (i) the shares	of Series F Preferred Stock issuable upon exercise of the
Warrants and (ii) the shares of Common Stock issuable upon conversion of the Series	F Preferred Stock).
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐	Section 4(6) ULOE
Type of Filing: New Filing Amendment	E LOADIL AT LE CALLE CAL
A. BASIC IDENTIFICATION I	DATA
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate	change.)
Arena Solutions, Inc.	08049911
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
4100 East Third Avenue, Suite 300, Foster City, California 94404	(650) 513-3500
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business: Materials Management Software	PROCESSED
	PROCESSED
Type of Business Organization	T 0000
☐ limited partnership, already formed	other (please specify): MAY 1 9 2000
☐ business trust ☐ limited partnership, to be formed	other (please specify): MAY 1 5 2008
Month Year	THOMSON REUTERS
Actual or Estimated Date of Incorporation or Organization: 0 2 0 0	□ Actual □ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbre	eviation for State:
CN for Canada; FN for other foreign juri	sdiction) C A

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Part B Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDE	NTIFICATION DATA		
2. Enter the information re	-	=			
		issuer has been organized	•		
 Each beneficial ow of the issuer; 	mer having the p	oower to vote or dispose, o	or direct the vote or dispos	sition of, 10% or	more of a class of equity securities
		of corporate issuers and or of partnership issuers.	of corporate general and n	nanaging partne	rs of partnership issuers; and
		Beneficial Owner	□ F		C C1 1/
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Scale Venture Partners II.	-				
Business or Residence Add		and Street, City, State, Zir	Code)	· · · · · · · · · · · · · · · · · · ·	······································
c/o Scale Venture Partner	-		•		
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Otter Capital LLC					
Business or Residence Add	ress (Number a	and Street, City, State, Zip	Code)		
755 Page Mill Road, Suite	A200, Palo Alte	o, California 94304			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or
					Managing Partner
Full Name (Last name first,	if individual)				
Topolovac, Michael					
Business or Residence Add	ress (Number a	and Street, City, State, Zip	Code)	,	•
719 Clementina, Unit A, Sa					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			•	•
Larkin, Eric					
Business or Residence Add	ress (Number a	and Street, City, State, Zip	Code)		
c/o Arena Solutions, Inc.,	4100 East Third	l Avenue, Suite 300, Fos	ter City, California 9440)4	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)	,			
Delapa-Shaw Family Trus	•				
Business or Residence Add	ress (Number a	and Street, City, State, Zip	Code)		
1160 Hoffman Avenue, M	onterey, Califor	rnia 93940			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
O'Driscoll, Rory					
Business or Residence Add	ress (Number a	and Street, City, State, Zip	Code)		
c/o Scale Venture Partner	s, 950 Tower La	ane, Suite 700, Foster Ci	ty, California 94404		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Pasquesi, John					
Business or Residence Add	ress (Number a	and Street, City, State, Zip	Code)		
c/o Otter Capital LLC, 75	5 Page Mill Roa	ad, Suite A200, Palo Alto	o, California 94304		

Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, Huml, Martin	if individual)				
Business or Residence Addr 294 Twin Peaks Blvd., San	•	• • • • • • • • • • • • • • • • • • • •	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner		☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Livingston, Craig	if individual)				
Business or Residence Addı c/o Arena Solutions, Inc.,	•		•	04	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number a	and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number a	and Street, City, State, Zip	Code)		
	(Use blar	nk sheet, or copy and use	additional copies of this sl	heet, as necessar	

			······································	В. П	NFORMAT	TION ABO	UT OFFEI	RING				
				•							Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									\boxtimes			
					Appendix, C		_					
2. What is	the minim	um investm	ent that will	be accepte	d from any	individual?	***************************************					
	. .										Yes	No
3. Does th	ie offering p	ermit joint	ownership	of a single	unit?				••••••			
commis a persor states, I	ssion or sim n to be liste list the nam	ilar remune ed is an asso e of the bro	ration for seciated personker or deal	olicitation on on or agent erIf more	tho has been of purchaser of a broker than five (or that broker)	s in connec or dealer r (5) persons	tion with sa egistered w to be listed	les of secur	ities in the and/or wit	offering. It h a state of	f r	
		first, if ind						·····				
Business o	r Residence	: Address (N	Number and	Street, City	y, State, Zip	Code)				•		
Name of A	ssociated B	Broker or De	ealer			<u></u>	· · · · · · · · · · · · · · · · · · ·		. <u> </u>			
States in W	/hich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers		·				
												☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
		first, if ind										
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated E	Broker or De	aler							<u>. </u>		
States in W	/hich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchacerc			<u>. </u>			
												. All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[VV]	[NH]	[נא]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[ບຖ]	[VT]	[VA]	[WA]	(wvj	[wi]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Rusiness o	r Pesidence	Address (A	Jumber and	Street City	y, State, Zip	Coda)						
Dusiliess 0	Residence	: Addiess (1	vuilloer allo	Succi, Cit	y, State, Zip	(Code)						
Name of A	ssociated B	Broker or De	aler	 						· · ·		
States in W	/hich Perso	n Listed Ha	s Solicited	or Intends to	o Solicit Pu	rchasers			.			
								•••••		•••••		☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[Al]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE	OF PROCEEDS				
En	Enter the aggregate offering price of securities included in this offering and the total amount already sold. ter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and alicate in the columns below the amounts of the securities offered for exchange and already exchanged.				•		
	Type of Security		Aggregate Offering Price		Amol	int Alre Sold	ady
	Debt	<u>\$</u> _	0.00		\$		0.00
	Equity	<u>\$</u> _	8,800,000.00		\$ 8	0,008,	00.00
	☐ Common ☑ Preferred						
	Convertible Securities (including warrants)	\$_	422,785.20		\$	422,	785.20
	Partnership Interests	\$_	0.00		\$		0.00
	Other (Specify)	\$_	0.00		\$	-	0.00
	Total	\$_	9,222,785.20		\$ 9	9,222,	785.20
	Answer also in Appendix, Column 3, if filing under ULOE.				<u> </u>		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				A	ggregate	e
			Number Investors		Doll	ar Amo Purchas	unt
	Accredited Investors		31		<u>\$</u>	9,222,	785.20
	Non-accredited Investors		0		<u>\$</u>		0.00
	Total (for filings under Rule 504 only)		N/A		<u>\$_</u>	(0.00
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.						
	Type of offering		Type of Security		Dol	lar Amo Sold	ount
	Rule 505		N/A		<u>\$_</u>	(0.00
	Regulation A		N/A		\$	(0.00
	Rule 504		N/A		<u>\$</u>		0.00
	· Total		N/A		\$_	(0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.						
	Transfer Agent's Fees				\$	(0.00
	Printing and Engraving Costs				<u>\$</u>	(0.00
	Legal Fees		[2	Ø	<u>\$</u>	50,000	<u>00.0</u>
	Accounting Fees	•••••]	<u>\$</u>		0.00
	Engineering Fees.				<u>\$</u>	(0.00
	Sales Commissions (specify finders' fees separately)				<u>\$</u>		0.00
	Other Expenses (identify) Blue Sky Filing Fees			Ø	<u>\$_</u>	1,516	0.00
	Total		🖸	X	<u>\$</u>	51,510	0.00

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AN	D U	SE OF	PROCEEDS			
	b. Enter the difference between the aggregate o and total expenses furnished in response to Part C proceeds to the issuer."	- Question 4.a. This difference is the "adjusted	gros				<u>\$9</u> ,	<u>171,275.20</u>
	Indicate below the amount of the adjusted gross proc the purposes shown. If the amount for any purpose i left of the estimate. The total of the payments listed forth in response to Part C - Question 4.b above.	s not known, furnish an estimate and check the box	to th	e				
	, ,				Payments to Officers, Directors, & Affiliates		I	Payments to Others
	Salaries and fees			\$	0.00		\$	0.00
	Purchase of real estate			<u>\$</u>	0.00		\$	0.00
	Purchase, rental or leasing and installation of	machinery and equipment		\$	0.00		\$	0.00
	Construction or leasing of plant buildings and	facilities		\$	0.00		\$	0.00
	Acquisition of other business (including the variance be used in exchange for the assets or security to the security of the se		\$	0.00		\$	0.00	
	Repayment of indebtedness			\$	0.00		\$	0.00
	Working capital			\$	0.00	\boxtimes	<u>\$9</u>	,171,275.20
	Other (specify):			\$	0.00		<u>\$</u>	0.00
	Column Totals			<u>\$</u>	0.00	\boxtimes	<u>\$ 9</u>	,171,275.20
	Total Payments Listed (column totals added).				\$ 9,17	1,275.	20	
_		D. FEDERAL SIGNATURE						
sign	issuer has duly caused this notice to be signed by nature constitutes an undertaking by the issuer to a formation furnished by the issuer to any non-accred	furnish to the U.S. Securities and Exchange Com	miss	ion, u				
Issu	er (Print or Type)	Signature						
Are	na Solutions, Inc.	1 fl			May 2, 200	8		
Nar	ne of Signer (Print or Type)	Frile of Signer (Print or Type)			-			
Cra	ig Livingston	President and Chief Executive Officer						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

